

REJECTION NOTICE - ADMINISTRATIVE REMEDY

DATE: OCTOBER 11, 2022

FROM: ADMINISTRATIVE REMEDY COORDINATOR
HAZELTON FCI

TO : JOAN CICCHIELLO, 72896-067
HAZELTON FCI UNT: K QTR: K12-221L
P.O. BOX 460
BRUCETON MILLS, WV 26525

fbagat
FILED
HARRISBURG, PA

OCT 26 2022

SH
PER _____
DEPUTY CLERK

FOR THE REASONS LISTED BELOW, THIS ADMINISTRATIVE REMEDY REQUEST
IS BEING REJECTED AND RETURNED TO YOU. YOU SHOULD INCLUDE A COPY
OF THIS NOTICE WITH ANY FUTURE CORRESPONDENCE REGARDING THE REJECTION.

REMEDIY ID : 1136708-F1 ADMINISTRATIVE REMEDY REQUEST
DATE RECEIVED : OCTOBER 11, 2022
SUBJECT 1 : OTHER COMMUNITY PROGRAMS
SUBJECT 2 :
INCIDENT RPT NO:

REJECT REASON 1: SEE REMARKS.

REMARKS : **YOU HAVE ALREADY FILED A BP9 REQUESTING HOME
CONFINEMENT. REFER TO ADMIN REMEDY #1136701-F1.**

exhibit 5

Type or use ball-point pen. If attachments are needed, submit four copies. Additional instructions on reverse.

From: Ochelle Jan
LAST NAME, FIRST, MIDDLE INITIAL

72896067
REG. NO.

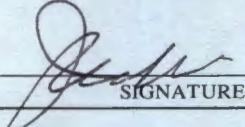
K. 221
UNIT
SFF Hazleton
INSTITUTION

Part A- INMATE REQUEST Inmate Williams, Myteka has been in Cell 221 for 10 months - She has had at least 9 other inmates as room mates All 9 have asked to move due to her aggressive behaviors. 221 is a top tier Room I have a bottom bunk order steps are good for me. There is an indoor walk cage for walking. Unfortunately K. 221 toilet is cracked. Per inmate Williams it has been broken since her arrival to said cell. She Williams claims she has placed caps on the plumbing inmates all to be told her toilet is cracked = met with plumbing inmates. All to be told her toilet is cracked = met with the raw sewage leaking from toilet to outside cell door. I met with the plumbing inmates. On 10/3/2022 - the toilet is cracked and they left see attached Resolution Home confinement

10/5/2022

DATE

SIGNATURE OF REQUESTER



Part B- RESPONSE

RECEIVED
10/11/22

DATE

WARDEN OR REGIONAL DIRECTOR

If dissatisfied with this response, you may appeal to the Regional Director. Your appeal must be received in the Regional Office within 20 calendar days of the date of this response.

ORIGINAL: RETURN TO INMATE

CASE NUMBER: 1130708-FI

CASE NUMBER: _____

Part C- RECEIPT

Return to:

LAST NAME, FIRST, MIDDLE INITIAL

REG. NO.

UNIT

INSTITUTION

SUBJECT: _____

DATE

RECIPIENT'S SIGNATURE (STAFF MEMBER)



Type or use ball-point pen. If attachments are needed, submit four copies. Additional instructions on reverse.

From: Cochetelle, Jan

LAST NAME, FIRST, MIDDLE INITIAL

72896067

REG. NO.

K.221

UNIT

SFF Nazleten

INSTITUTION

Part A- INMATE REQUEST

Inmate Williams, Mykka has been in Cell K.221 for 10 months. She has had at least 9 other inmates as room mates. All 9 have asked to move. Due to her aggressive behaviors, she is in a top tier room - have a bottom bunk or dock. Steps are good for me. There is an indoor walk way for walking. Unfortunately K.221 G. there is an indoor walk way for walking. Unfortunately K.221 toilet is cracked. Per Inmate Williams, it has been cracked since her arrival to said cell. She claims she has plotted reports with Plumbing inmates. All to be told her toilet is cracked - and sewage leaking from toilet to outside cell door. I met with the plumbing inmates. On 10/3/2022 - the toilet is cracked and they left. See attached resolution. Honorable confinement.

10/5/2022

DATE

SIGNATURE OF REQUESTER

Part B- RESPONSE

10/11/22

DATE

WARDEN OR REGIONAL DIRECTOR

If dissatisfied with this response, you may appeal to the Regional Director. Your appeal must be received in the Regional Office within 20 calendar days of the date of this response.

SECOND COPY: RETURN TO INMATE

CASE NUMBER: 1136708-FI

CASE NUMBER: _____

Part C- RECEIPT

Return to:

LAST NAME, FIRST, MIDDLE INITIAL

REG. NO.

UNIT

INSTITUTION

SUBJECT: _____

DATE

RECIPIENT'S SIGNATURE (STAFF MEMBER)



Federal Bureau of Prisons

Type or use ball-point pen. If attachments are needed, submit four copies. Additional instructions on reverse.

From: Gabrielle J. Williams **LAST NAME, FIRST, MIDDLE INITIAL**

REG. NO.**UNIT****INSTITUTION**

Part A- INMATE REQUEST Immate Williams, Mykell has been in cell K-221 for 10 months. She has had at least 9 other inmates as roommates. All 9 have asked to move. Due to her Aggressive Behavior, she has been moved into other Room I have a bottom bunk covek. Steps are fear from K-221. She is on indoor walk lock for walking. Unfortunately K-221 toilet is cracked. For Inmate Williams, it has been broken since her arrival to Sand Coll. She Williams claims she has phoned reports of plumbing issues with the toilet. She told her toilet is cracked - not with plumbing. She has not been able to get outside Coll. door. I met with the head sewage leaving from toilet to outside Coll. door. I met with the plumbing contractors on 10/3/2022 - the toilet is cracked and they left. Resolution Home Confinement

10/5/2022**DATE****SIGNATURE OF REQUESTER****Part B- RESPONSE**10/11/22**DATE****WARDEN OR REGIONAL DIRECTOR**

If dissatisfied with this response, you may appeal to the Regional Director. Your appeal must be received in the Regional Office within 20 calendar days of the date of this response.

THIRD COPY: RETURN TO INMATE**CASE NUMBER:** 113-705-FL**CASE NUMBER:** _____**Part C- RECEIPT**

Return to:

LAST NAME, FIRST, MIDDLE INITIAL**REG. NO.****UNIT****INSTITUTION****SUBJECT:** _____**DATE****RECIPIENT'S SIGNATURE (STAFF MEMBER)**

NUMBER: HAX-1330.18
 DATE: February 3, 2014
 SUBJECT: Administrative Remedy
 Program
 PAGE: 9

ATTACHMENT A

Federal Correctional Complex Hazelton
 Request for Administrative Remedy
 Informal Resolution Form - General Population

Notice to Inmates: Prior to receiving a Request for Administrative Remedy Form (BP-229), you MUST attempt Informal Resolution through your Counselor, or provide other documentary evidence of your attempt at informal resolution. Failing to attempt informal resolution may result with rejection of your request.

Part A					
Inmate Name: <i>Crachelle Tran</i>	Reg. No.: <i>72896067</i>	Unit: <i>X. 221</i>			
1. Specific Complaint: <i>Placed in cell 221 w/ Raw sewage / Aggressive inmate</i>					
2. Relief Requested: <i>Place in home confinement</i>					
Part B					
Food Service	Unit Manager <input checked="" type="checkbox"/>	UNICOR			
Business Office	Psychology <input checked="" type="checkbox"/>	Education			
Trust Fund/Laundry	Religious Services <input checked="" type="checkbox"/>	Recreation			
Health Services	Correctional Svcs <input checked="" type="checkbox"/>	Facilities			
Safety	ISM/Mailroom/Records <input checked="" type="checkbox"/>	Administration			
Part C					
<input checked="" type="checkbox"/> Issue Resolved Relief granted	Comments: Work order submitted. You are appropriately housed				
<input checked="" type="checkbox"/> Issue Un-resolved No Relief granted	Comments:				
Unable to Address Issue Referred	Comments:				
Inmate Signature: <i>Tran</i>	Date: <i>9/29/22</i>				
Staff Signature: <i>M. Myers</i>	Date: <i>10/3/22</i>				
Unit Manager Signature: <i>M. Miller</i>	Date: <i>10/3/22</i>				
Counselor Tracking					
Tracking #	Event Date	+ 20 Days	Form Issued	BP-9 Issued	BP-9 Returned
147			9-29-17	10-3-22	

TRULINCS 72896067 - CICCHIELLO, JOAN - Unit: HAF-K-A

FROM: SFF Unit K
TO: 72896067
SUBJECT: RE:***Inmate to Staff Message***
DATE: 09/26/2022 01:32:02 PM

A work order was submitted

From: ~^! CICCHIELLO, ~^!JOAN <72896067@inmatemessage.com>
Sent: Friday, September 23, 2022 3:12 PM
To: HAF-InmateToSFFUnitK (BOP) >
Subject: ***Request to Staff*** CICCHIELLO, JOAN, Reg# 72896067, HAF-K-A

To: Slinka
Inmate Work Assignment: N/A

Follow Up
On 9/11/22 I sent a cop out re: raw sewage leaking into cell 221 --that cop out was hand carried to you by me.
During the week of 9/18/22 the team that came to do inspection visited cell 221 and stated that they would make a work request for repairs.

I thought I would keep you abreast of the situation

Respectfully Submitted

Joan Cicchiello

72896067 - CICCHIELLO, JOAN - Unit: HAF-K-A

FROM: SFF Unit K
TO: 72896067
SUBJECT: RE:***Inmate to Staff Message***
DATE: 09/26/2022 01:32:02 PM

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To: HAF-InmateToSFFUnitK (BOP) >
Subject: ***Request to Staff*** CICCHIELLO, JOAN, Reg# 72896067, HAF-K-A

To: Slinka
Inmate Work Assignment: N/A

Follow Up

On 9/11/22 I sent a cop out re: raw sewage leaking into cell 221 --that cop out was hand carried to you by me.
During the week of 9/18/22 the team that came to do inspection visited cell 221 and stated that they would make a work request for repairs.

I thought I would keep you abreast of the situation

Respectfully Submitted

Joan Cicchiello

TRULINCS 72896067 - CICCHIELLO, JOAN - Unit: HAF-K-A

FROM: 72896067
TO: SFF Unit K
SUBJECT: ***Request to Staff*** CICCHIELLO, JOAN, Reg# 72896067, HAF-K-A
DATE: 09/29/2022 01:34:02 PM

To: Slinka
Inmate Work Assignment: N/A

Just a note that My PB 8's all 5 of them were placed with you today.

I am begining the Administrative Remedy situation using the policy and procedure outlined by the inmate hand book.
After that I will address my Judge in my district

Thank You for your time and inconvenience.

72896067 - CICCHIELLO, JOAN - Unit: HAF-K-A

FROM: 72896067
TO: SFF Unit K
SUBJECT: ***Request to Staff*** CICCHIELLO, JOAN, Reg# 72896067, HAF-K-A
DATE: 10/03/2022 01:33:13 PM

To: Slinka
Inmate Work Assignment: N/A

Update on the toilet

Two females that work in plumbing = They
They came to fix the toilet today. They realized that the entire toilet is cracked clear through the base of the toilet.
They stated that they have a new toilet in the warehouse. They plan to repair it as soon as possible.

**Individualized Needs Plan - Program Review (Inmate Copy)**

SEQUENCE: 02111758

Dept. of Justice / Federal Bureau of Prisons

Team Date: 09-24-2022

Plan is for inmate: CICCHIELLO, JOAN 72896-067

Facility: HAF HAZELTON FCI Proj. Rel. Date: 07-11-2024
 Name: CICCHIELLO, JOAN Proj. Rel. Mthd: GOOD CONDUCT TIME
 Register No.: **72896-067** DNA Status: DAN06426 / 07-03-2018
 Age: 71
 Date of Birth: 10-28-1950

Detainers

Detaining Agency	Remarks
NO DETAINER	

Pending Charges

'17 PERJURY, TAMPER W/ PUBLIC RECORDS, THEFT. WARRANT ISSUED 11/2017. SUNBURY, PA. MJ-08304-CR-389-2017.
--

Current Work Assignments

Fac	Assignment	Description	Start
HAF	W A&O	SFF A&O	08-24-2022

Current Education Information

Fac	Assignment	Description	Start
HAF	ESL HAS	ENGLISH PROFICIENT	06-08-2018
HAF	GED HAS	COMPLETED GED OR HS DIPLOMA	06-08-2018

Education Courses

SubFac	Action	Description	Start	Stop
DAN SCP	C	LEGAL WRITING - FPC	01-29-2020	03-18-2020
DAN SCP	C	PERSPECTIVE ART - FPC	01-28-2020	03-17-2020
DAN SCP	C	PROFESSIONAL TYPING CLASS	09-20-2019	01-21-2020
DAN SCP	C	CROCHET	10-23-2019	12-11-2019
DAN SCP	C	ACE- BOOK CLUB THE GIVER	09-24-2019	11-15-2019
DAN SCP	C	INTRODUCTION TO ART	09-24-2019	11-15-2019
DAN SCP	C	THE OUTSIDERS BOOK CLUB	08-15-2019	09-12-2019
DAN SCP	C	LEGAL SECRETARY APPRENTICE	07-12-2018	06-08-2019
DAN SCP	C	JOB FAIR INFORMATION	06-13-2019	06-13-2019
DAN SCP	C	WOMEN REST BASED FITNESS FPC	04-15-2019	05-24-2019
DAN SCP	C	WILL, TRUST, & ESTATE - FPC	04-10-2019	06-06-2019
DAN SCP	C	SMALL BUSINESS I	04-15-2019	06-06-2019
DAN SCP	C	INTRO TO REAL ESTATE	04-15-2019	06-06-2019
DAN SCP	C	FPC- CREATIVE WRITING	04-15-2019	06-05-2019
DAN SCP	C	MOCK TRIAL	12-20-2018	02-08-2019
DAN SCP	C	INTERMEDIATE SPANISH	12-19-2018	02-05-2019
DAN SCP	C	HOW TO IMPROVE YOUR CREDIT ENG	12-18-2018	02-05-2019
DAN SCP	C	NUTRITION CLASS AT CAMP	01-14-2019	03-04-2019
DAN SCP	C	WOMEN'S RELATIONSHIPS-FPC	12-10-2018	01-29-2019
DAN SCP	C	JOB FAIR INFORMATION	12-06-2018	12-06-2018
DAN SCP	C	INTRO TO SPANISH	09-10-2018	11-09-2018
DAN SCP	C	INTRO TO LEGAL STUDIES	09-10-2018	11-26-2018
DAN SCP	C	CAREER DEVELOPMENT SKILLS	09-10-2018	11-05-2018
DAN SCP	C	PLASTIC CANVAS CLASS AT CAMP	07-20-2018	09-07-2018
DAN SCP	C	KNITTING AT CAMP	07-17-2018	09-04-2018

Discipline History (Last 6 months)

Hearing Date	Prohibited Acts
** NO INCIDENT REPORTS FOUND IN LAST 6 MONTHS **	

Current Care Assignments

Assignment	Description	Start
CARE1-MH	CARE1-MENTAL HEALTH	06-11-2018
CARE2	STABLE, CHRONIC CARE	06-06-2018

**Individualized Needs Plan - Program Review (Inmate Copy)**

SEQUENCE: 02111758

Dept. of Justice / Federal Bureau of Prisons

Team Date: 09-24-2022

Plan is for inmate: CICCHIELLO, JOAN 72896-067

Current Medical Duty Status Assignments

Assignment	Description	Start
COLD/WIND	NO EXCESS COLD/WIND	06-12-2018
C19-QUAR	COVID-19 QUARANTINED	04-16-2020
C19-T NEG	COVID-19 TEST-RESULTS NEGATIVE	06-09-2020
LIMIT SUN	NO EXCESS SUN	06-12-2018
LOWER BUNK	LOWER BUNK REQUIRED	09-06-2022
NO PAPER	NO PAPER MEDICAL RECORD	06-06-2018
REG DUTY W	REGULAR DUTY W/MED RESTRICTION	06-12-2018
SOFT SHOES	SOFT SHOES ONLY	06-12-2018
WGT 15 LB	WEIGHT-NO LIFTING OVER 15 LBS	06-12-2018
YES F/S	CLEARED FOR FOOD SERVICE	06-12-2018

Current Drug Assignments

Assignment	Description	Start
NO ASSIGNMENTS		

FRP Payment Plan**Most Recent Payment Plan**

FRP Assignment: PART FINANC RESP-PARTICIPATES Start: 02-05-2020

Inmate Decision: AGREED \$25.00 Frequency: QUARTERLY

Payments past 6 months: \$0.00 Obligation Balance: \$300,822.17

Financial Obligations

No.	Type	Amount	Balance	Payable	Status
1	ASSMT	\$100.00	\$0.00	IMMEDIATE	COMPLETEDZ
** NO ADJUSTMENTS MADE IN LAST 6 MONTHS **					
4	ASSMT	\$100.00	\$100.00	IMMEDIATE	AGREED
** NO ADJUSTMENTS MADE IN LAST 6 MONTHS **					
2	REST NV	\$151,122.17	\$150,722.17	IMMEDIATE	AGREED
** NO ADJUSTMENTS MADE IN LAST 6 MONTHS **					
3	FINE	\$150,000.00	\$150,000.00	IMMEDIATE	AGREED
** NO ADJUSTMENTS MADE IN LAST 6 MONTHS **					

FRP Deposits

Trust Fund Deposits - Past 6 months: \$ N/A Payments commensurate ? N/A

New Payment Plan: ** No data **

Current FSA Assignments

Assignment	Description	Start
N-ANGER R	NEED - ANGER/HOSTILITY REFUSE	08-27-2022
N-ANTISO R	NEED - ANTSOCIAL PEERS REFUSE	08-27-2022
N-COGNTV R	NEED - COGNITIONS REFUSE	08-27-2022
N-DYSLEX N	NEED - DYSLEXIA NO	08-29-2022
N-FIN PV Y	NEED - FINANCE/POVERTY YES	09-21-2022
N-FM/PAR R	NEED - FAMILY/PARENTING REFUSE	08-27-2022
N-M HLTH N	NEED - MENTAL HEALTH NO	08-27-2022
N-MEDICL Y	NEED - MEDICAL YES	09-06-2022
N-RLF Y	NEED - REC/LEISURE/FITNESS YES	09-06-2022
N-WORK N	NEED - WORK NO	08-29-2022
R-MIN	MINIMUM RISK RECIDIVISM LEVEL	09-21-2022
UNREVIEWD HIS	UNREVIEWED OFFENSES	05-04-2021

Progress since last review

Cicchello was advised at initial classification and program reviews to maintain clear conduct, have positive staff & peer interaction, participate in educational/vocational recommendations & requirements, meet Financial Responsibility Program (FRP) requirements & responsibilities, participate in programming recommendations and requirements. She was encouraged to obtain a work assignment/institution employment. To maintain positive friend & family communication, participate in Release Preparation Program

**Individualized Needs Plan - Program Review (Inmate Copy)**

Dept. of Justice / Federal Bureau of Prisons

Plan is for inmate: CICCHIELLO, JOAN 72896-067

SEQUENCE: 02111758

Team Date: 09-24-2022

(RPP), use Institutional & Reentry resources to prepare for release into the community (obtain release residence, employment info./employment folder, and identify treatment needs).

Next Program Review Goals

RECOMMENDATION for next program review: Participate in College Correspondence through Education, although she has a Masters Degree. Continue SELF DEVELOP BY programming and obtaining/maintaining INSTITUTIONAL EMPLOYMENT. Encouraged to find employment in Education as a tutor.

Long Term Goals

Participate/complete following: Release Preparation Program (RPP). -Place funds in pre-release account & present financial plan. Obtain birth certificate, SOCIAL SECURITY CARD (IF NEEDED) & a photo identification. ENROLL AND COMPLETE ONE OF THE Following Programs: Money Smart, Criminal Thinking, Foundations, Assert Yourself. Drug Education (Required), Non-RES Drug Abuse Program, RDAP/FIT. -EDC: 2 ACE and/or VT Program. ACCOMPLISH RECOMMENDATION FROM J&C AND RESOLVE PENDING CHARGES.

RRC/HC Placement

Consideration has been given for Five Factor Review (Second Chance Act): 7

- Facility Resources
- Offense
- Prisoner
- Court Statement
- Sentencing Commission

ENTERED 2/3s DATE PER FSA, ELDERLY PROVISION

Comments

Ensure all contact list information is current & correct (inaccurate information could delay release plan & programs). Initial Custody Classification (points) is conducted 7 months from arrival then annually. Begin Release Preparation Program (no later than 30 months from PRD). Use Institutional & Re-entry resources to provide strong valid release address no later than 24 months from PRD. RRC/HC Eligibility review 19 to 17 months from PRD (5 Factor Review/2nd Chance Act). Present employment folder at all program reviews (to include but not limited to: resume (TYPED), certificates, awards, education data report, release job information/status) & financial plan. 13 months from PRD, Unit RPP is conducted to finalize release & treatment plans for submission of RRC/HC referral or Notice of Release.

Routine Reassessment conducted, no PREA concerns met or noted.

Finance/Poverty Need Screen Is there documentation in the PSR of any of the following? Any history of Bankruptcy
 No bank account

No assets nor liabilities noted in PSR

 Debts noted in Credit Report or other sources

Tax Liabilities/back taxes

Unpaid alimony/child support

other indications of lack of financial management skills (specify) SEE PSI, FINANCIAL CONDITION SECTION YES NO _____ (if any of the above, check yes) If the answer is yes, the inmate has a financial/poverty skills need.

FSA Recidivism Risk Assessment (PATTERN 01.03.00)

Register Number: 72896-067, Last Name: CICCHIELLO

U.S. DEPARTMENT OF JUSTICE**FEDERAL BUREAU OF PRISONS**

Register Number: 72896-067	Risk Level Inmate....: R-MIN
Inmate Name	General Level.....: R-MIN (-15)
Last.....: CICCHIELLO	Violent Level.....: R-MIN (-7)
First.....: JOAN	Security Level Inmate: MINIMUM
Middle.....:	Security Level Facil.: LOW
Suffix.....:	Responsible Facility.: HAF
Gender.....: FEMALE	Start Incarceration..: 05/09/2018

PATTERN Worksheet Summary

Item	- Value	- General Score	- Violent Score
Current Age	71	0	0
Violent Offense (PATTERN)	FALSE	0	0
Criminal History Points	0	0	0
<u>History of Escapes</u>	3	<u>9</u>	3
<u>History of Violence</u>	0	0	0
Education Score	HighSchoolDegreeOrGED	-6	-2
Drug Program Status	NoNeed	-9	-3
All Incident Reports (120 Months)	1	1	0
Serious Incident Reports (120 Months)	0	0	0
Time Since Last Incident Report	28	0	0
Time Since Last Serious Incident Report	N/A	0	0
FRP Refuse	FALSE	0	0
Programs Completed	16	-8	-4
Work Programs	1	2	-1
	Total	-15	-7

HAF69 540*23 *
PAGE 001 *SENTENCE MONITORING
COMPUTATION DATA
AS OF 10-16-2022* 10-16-2022
* 13:51:15

REGNO..: 72896-067 NAME: CICCHIELLO, JOAN

FBI NO.....: 362210VC4
ARS1.....: HAF/A-DES
UNIT.....: K
DETAINERS.....: NODATE OF BIRTH: 10-28-1950 AGE: 71
QUARTERS.....: K12-221L
NOTIFICATIONS: NOFSA ELIGIBILITY STATUS IS: INELIGIBLE

THE FOLLOWING SENTENCE DATA IS FOR THE INMATE'S CURRENT COMMITMENT.

HOME DETENTION ELIGIBILITY DATE....: 01-11-2024

THE INMATE IS PROJECTED FOR RELEASE: 07-11-2024 VIA GCT REL

-----COURT JUDGMENT/WARRANT NO: 010 -----

COURT OF JURISDICTION.....: PENNSYLVANIA, MIDDLE DISTRICT
DOCKET NUMBER.....: 1:15CR00223
JUDGE.....: JONES
DATE SENTENCED/PROBATION IMPOSED: 05-09-2018
DATE COMMITTED.....: 06-05-2018
HOW COMMITTED.....: US DISTRICT COURT COMMITMENT
PROBATION IMPOSED.....: NO

FELONY ASSESS	MISDMNR ASSESS	FINES	COSTS
NON-COMMITTED.: \$100.00	\$00.00	\$150,000.00	\$00.00

RESTITUTION...: PROPERTY: NO SERVICES: NO AMOUNT: \$151,122.17

-----COURT OBLIGATION NO: 010 -----

OFFENSE CODE....: 153 18:286,371 FRAUD, OTHER
OFF/CHG: 18:1347 HEALTH CARE FRAUD (CT.1)SENTENCE PROCEDURE.....: 3559 PLRA SENTENCE
SENTENCE IMPOSED/TIME TO SERVE.: 72 MONTHS
TERM OF SUPERVISION.....: 3 YEARS
DATE OF OFFENSE.....: 12-31-2015

G0002 MORE PAGES TO FOLLOW . . .

Exhibit 7

HAF69 540*23 *
PAGE 002 *SENTENCE MONITORING
COMPUTATION DATA
AS OF 10-16-2022* 10-16-2022
* 13:51:15

REGNO.: 72896-067 NAME: CICCHIELLO, JOAN

-----CURRENT JUDGMENT/WARRANT NO: 020 -----

COURT OF JURISDICTION.....: PENNSYLVANIA, MIDDLE DISTRICT
 DOCKET NUMBER.....: 1:21-CR-100-1
 JUDGE.....: CONNER
 DATE SENTENCED/PROBATION IMPOSED: 06-29-2022
 DATE COMMITTED.....: 08-24-2022
 HOW COMMITTED.....: US DISTRICT COURT COMMITMENT
 PROBATION IMPOSED.....: NO

	FELONY ASSESS	MISDMNR ASSESS	FINES	COSTS
NON-COMMITTED.:	\$100.00	\$00.00	\$00.00	\$00.00
RESTITUTION....:	PROPERTY: NO	SERVICES: NO	AMOUNT: \$00.00	

-----CURRENT OBLIGATION NO: 010 -----
 OFFENSE CODE....: 521 PERJURY
 OFF/CHG: 18:1621 PERJURY CT-1

SENTENCE PROCEDURE.....: 3559 PLRA SENTENCE
 SENTENCE IMPOSED/TIME TO SERVE.: 15 MONTHS
 TERM OF SUPERVISION.....: 3 YEARS
 RELATIONSHIP OF THIS OBLIGATION
 TO OTHERS FOR THE OFFENDER....: CS TO 010/010
 DATE OF OFFENSE.....: 08-17-2020

-----CURRENT COMPUTATION NO: 010 -----

COMPUTATION 010 WAS LAST UPDATED ON 07-01-2022 AT DSC AUTOMATICALLY
 COMPUTATION CERTIFIED ON 07-07-2022 BY DESIG/SENTENCE COMPUTATION CTR

THE FOLLOWING JUDGMENTS, WARRANTS AND OBLIGATIONS ARE INCLUDED IN
 CURRENT COMPUTATION 010: 010 010, 020 010

G0002 MORE PAGES TO FOLLOW . . .

HAF69 540*23 *
 PAGE 003 OF 003 *

SENTENCE MONITORING
 COMPUTATION DATA
 AS OF 10-16-2022

* 10-16-2022
 * 13:51:15

REGNO.: 72896-067 NAME: CICCHIELLO, JOAN

DATE COMPUTATION BEGAN.....: 05-09-2018
 AGGREGATED SENTENCE PROCEDURE...: AGGREGATE GROUP 800 PLRA
 TOTAL TERM IN EFFECT.....: 87 MONTHS
 TOTAL TERM IN EFFECT CONVERTED..: 7 YEARS 3 MONTHS
 AGGREGATED TERM OF SUPERVISION..: 3 YEARS
 EARLIEST DATE OF OFFENSE.....: 12-31-2015

JAIL CREDIT.....	FROM DATE	THRU DATE
	10-06-2015	10-06-2015
	02-20-2018	02-20-2018

TOTAL PRIOR CREDIT TIME.....: 2
 TOTAL INOPERATIVE TIME.....: 0
 TOTAL GCT EARNED AND PROJECTED..: 391
 TOTAL GCT EARNED.....: 216
 STATUTORY RELEASE DATE PROJECTED: 07-11-2024
 ELDERLY OFFENDER TWO THIRDS DATE: 03-08-2023
 EXPIRATION FULL TERM DATE.....: 08-06-2025
 TIME SERVED.....: 4 YEARS 5 MONTHS 10 DAYS
 PERCENTAGE OF FULL TERM SERVED..: 61.3
 PERCENT OF STATUTORY TERM SERVED: 71.9

PROJECTED SATISFACTION DATE.....: 07-11-2024
 PROJECTED SATISFACTION METHOD...: GCT REL

REMARKS.....: 3/4/2020 RPC'D FSA E/JKR.
 5-5-2021RECV'D 907 NO INOP TIME DE TO STILL IN FEDERAL CUSTODY
 ON NEW CHARGES E/CLM; 07-01-22 RCVD CS J&C TOT TERM=87M.E/YLR

G0000

TRANSACTION SUCCESSFULLY COMPLETED

4. REQUESTS BASED ON NON-MEDICAL CIRCUMSTANCES – ELDERLY INMATES

The criteria for a RIS request may include the following:

a. **“New Law” Elderly Inmates.** Inmates sentenced for an offense that occurred on or after November 1, 1987 (e.g., “new law”), who are age 70 years or older and have served 30 years or more of their term of imprisonment.¹⁽¹⁾

b. **Elderly Inmates with Medical Conditions.** Inmates who fit the following criteria:

Age 65 and older.

Suffer from chronic or serious medical conditions related to the aging process.

Experiencing deteriorating mental or physical health that substantially diminishes their ability to function in a correctional facility.

Conventional treatment promises no substantial improvement to their mental or physical condition.

Have served at least 50% of their sentence.

Additionally, for inmates in this category, the BOP should consider the following factors when evaluating the risk that an elderly inmate may reoffend:

The age at which the inmate committed the current offense.

Whether the inmate suffered from these medical conditions at the time the inmate committed the offense.

Whether the inmate suffered from these medical conditions at the time of sentencing and whether the Presentence Investigation Report (PSR) mentions these conditions.

pro

Request for Reduction in Sentence Form

Name: Cacciello, Jon Date: 10/08/2022 Unit: K Register #: 71896062

A. Please check what type of RIS you are filing. Only select one. Please refer to Program Statement 5050.50 – 1/17/2019

1. Terminal Medical Condition

2. Debilitated Medical Condition. Briefly describe your medical condition:

3. Elderly Inmate with Medical Conditions – (must be age 65 or older and completed at least 50% of your sentence)

Age: 72 Have you served at least 50% of your sentence? Yes No

4. Other Elderly Inmate – (must be age 65 or older and completed the greater of 10 years or 75% of your sentence)

Age: _____ Have you served the greater of 10 years or 75% of your sentence? Yes No

5. "New Law" Elderly Inmates – (sentenced for an offense that occurred on or after November 1, 1987, who are age 70 years or older and have served 30 years or more of their term of imprisonment.)

6. Death or Incapacitation of Caregiver of Child(ren)

7. Incapacitation of a Spouse or Registered Partner

Exhibit 9

B. Each RIS request must include the following information:

1. Proposed Release Plan-

Where will you reside and with whom? 35 West Avenue
Mt. Carmel Pa

How will you support yourself? Social Security / Son

Where will you receive medical treatment? Hershey Medical Center

How will you pay for medical treatment? Social Security

2. Any additional information you wish to be considered:

35 West Avenue Mt. Carmel is owned by
A trust - James Rocco Cichelli Maintains
Properties of the Trust.

Since my ARRIVAL AT SFF Hazleton Petitioner's
Feet turn Blue & Petitioner Sits with Feet on
Floor. Nurse Practitioner Rash, J(ma)CRNP AND
DR ADAMS - have witnessed AND have referred to
HAVE Venus Studies AND ALSO Referred Petitioner
to Cardiologist A UPMC in Maryland.

Petitioner Sits on the Floor with Blanket to allow
Blood to Flow back to the Heart.

my Vision - Concern with ultimately becoming
Blind due to Dey eyes AND the Poor medical
Condition that occurred at Dauphin County Prison
this is AN EMERGENCY Situation

For Court
Information

Reduction in Sentence (RIS) Information and Instructions

- 1. Please refer to Program Statement 5050.50 – January 17, 2019**
- 2. If you are interested in applying for an RIS, please fill out an application (on Trulincs) and select only one option. Give your completed form to your Unit Manager, who will forward it to the Warden.**
- 3. The RIS Coordinators will process your request and reply to you (Ms. Rice or Ms. Hamilton).**

REJECTION NOTICE - ADMINISTRATIVE REMEDY

DATE: OCTOBER 11, 2022

FROM: ADMINISTRATIVE REMEDY COORDINATOR
HAZELTON FCI

TO : JOAN CICCHIELLO, 72896-067
HAZELTON FCI UNT: K QTR: K12-221L
P.O. BOX 460
BRUCETON MILLS, WV 26525

FOR THE REASONS LISTED BELOW, THIS ADMINISTRATIVE REMEDY REQUEST IS BEING REJECTED AND RETURNED TO YOU. YOU SHOULD INCLUDE A COPY OF THIS NOTICE WITH ANY FUTURE CORRESPONDENCE REGARDING THE REJECTION.

REMEDIY ID : 1136716-F1 ADMINISTRATIVE REMEDY REQUEST
DATE RECEIVED : OCTOBER 11, 2022
SUBJECT 1 : CLASSIFICATION/PROGRAM REVIEWS
SUBJECT 2 :
INCIDENT RPT NO:

REJECT REASON 1: YOU MUST PROVIDE MORE SPECIFIC INFORMATION (E.G. CASE NO.) ABOUT YOUR REQUEST/APPEAL SO THAT IT MAY BE CONSIDERED.

REJECT REASON 2: YOU MAY RESUBMIT YOUR APPEAL IN PROPER FORM WITHIN 10 DAYS OF THE DATE OF THIS REJECTION NOTICE.

REMARKS : THERE IS NO RELIEF REQUESTED ON THE BP9.
10 DAYS TO RESUBMIT.

10 days from
10-13-22

Exhibit 10

U.S. DEPARTMENT OF JUSTICE
BUREAU OF PRISONS

Type or use ball-point pen. If attachments are needed, submit four copies. Additional instructions on reverse.

From: Cicchielo Jon
LAST NAME, FIRST, MIDDLE INITIAL

72896 067 · REG. NO.

K 221 · UNIT

SFF Hazelton · INSTITUTION

Part A- INMATE REQUEST

ON 9/21/2022 I received my Individualized Needs Plans Initial Classification ON Pg 2 of my Classification Form it States I Refuse All Programs, All my FSA Assignments State Release - See ATTACHED A

I ATTENDED my 1st Program on 10-4-2022 - B Attachment

I WROTE to Psych - See ATTACHED

See

10/4/2022

DATE

SIGNATURE OF REQUESTER

Part B- RESPONSE

DATE

WARDEN OR REGIONAL DIRECTOR

If dissatisfied with this response, you may appeal to the Regional Director. Your appeal must be received in the Regional Office within 20 calendar days of the date of this response.

ORIGINAL: RETURN TO INMATE

CASE NUMBER: 1136716-F1

Part C- RECEIPT

Return to:

CASE NUMBER: _____

SUBJECT: _____

LAST NAME, FIRST, MIDDLE INITIAL

REG. NO.

UNIT

INSTITUTION

USP LVN

DATE

RECIPIENT'S SIGNATURE (STAFF MEMBER)



PRINTED ON RECYCLED PAPER

NUMBER: HAX-1330.18D
 DATE: February 22, 2021
 SUBJECT: Administrative Remedy
 Program
 PAGE: 8

ATTACHMENT A

Federal Correctional Complex Hazelton
 Request for Administrative Remedy
 Informal Resolution Form - General Population

Notice to Inmates: Prior to receiving a Request for Administrative Remedy Form (BP-229), you MUST attempt Informal Resolution through your Counselor, or provide other documentary evidence of your attempt at informal resolution. Failing to attempt informal resolution may result with rejection of your request.

Part A					
Inmate Name: <i>Ciachello, Sean</i>	Reg. No.: <i>72896 067</i>	Unit: <i>Ki 221</i>			
1. Specific Complaint: <i>For classification & Refused Courses</i>					
2. Relief Requested: <i>Place on Disciplinary Conference</i>					
Part B					
Food Service	Unit Manager <input checked="" type="checkbox"/>	UNICOR			
Business Office	Psychology	Education			
Trust Fund/Laundry	Religious Services	Recreation			
Health Services	Correctional Svcs	Facilities			
Safety	ISM/Mailroom/Records	Administration			
Part C					
Issue Resolved Relief granted	Comments:				
Issue Un-resolved No Relief granted	Comments: <i>Must enroll in courses</i>				
Unable to Address Issue Referred	Comments:				
Inmate Signature: <i>[Signature]</i>	Date: <i>9/29/22</i>				
Staff Signature: <i>[Signature]</i>	Date: <i>10/3/22</i>				
Unit Manager Signature: <i>[Signature]</i>	Date: <i>10/3/22</i>				
Counselor Tracking					
Tracking #	Event Date	+ 20 Days	Form Issued	BP-9 Issued	BP-9 Returned
<i>1489</i>			<i>9-29-22</i>	<i>103-22</i>	

EG NO	NAME	FROM	TO	TIME	CATEGORY (2)	CATEGORY (3)
CALLOUTS	FOR	10-04-2022			QTR ASGN	WRK ASGN
72896-067	CICCHIELLO		F PSY RGRP	0800	K12-221L	W LABOR PL
23243-032	DOPLE		F PSY RGRP	0800	K11-114U	W LABOR PL
22755-479	GUERRERO		F PSY RGRP	0800	K11-109U	W K1 ORD
22501-084	HARPER		F PSY RGRP	0800	K11-125U	W K1 ORD
47809-509	HINOJOSA		F PSY RGRP	0800	K11-115U	W K1 ORD
54704-074	LOFTIN		F PSY RGRP	0800	K12-212U	W LABOR PL
67435-060	MARZANO		F PSY RGRP	0800	K11-113L	W LABOR PL
71458-509	ROSS		F PSY RGRP	0800	K12-220L	W LABOR PL
21616-041	SANCHEZ		F PSY RGRP	0800	K11-119L	W LABOR PL
38556-509	WALKER		F PSY RGRP	0800	K11-103U	W REC AM
27103-081	MCCORKLE		F PSY RGRP	1200	J12-226U	W LABOR PL
69661-066	RAMOS		F PSY RGRP	1200	J13-116L	W LABOR PL
15303-509	SCOTT		F PSY RGRP	1200	J14-214U	W LABOR PL
95229-298	YANEZ		F PSY RGRP	1200	J11-126L	W LABOR PL
18223-029	ADAMS		F PSY RGRP	1330	J14-214L	W LABOR PL
24080-509	GAZAWAY		F PSY RGRP	1330	J13-115U	W LABOR PL
11357-509	HERNANDEZ		F PSY RGRP	1330	J13-102L	W J2 ORD
44931-509	HILL		F PSY RGRP	1330	J13-105L	W J2 ORD
17691-059	HILL		F PSY RGRP	1330	J13-115L	W LABOR PL
16120-040	HORTON		F PSY RGRP	1330	J14-219L	W LABOR PL
33093-509	MAYO		F PSY RGRP	1330	J14-202L	W LABOR PL
95535-298	AGGABAO		J1 129RDAP	1230	J11-114L	W J1 ORD
94697-479	BALDERAS		J1 129RDAP	1230	J11-122U	W FS KITPM
29477-031	BELL		J1 129RDAP	1230	J11-125L	W J1 ORD
78365-061	COPE		J1 129RDAP	1230	J12-216L	W J1 ORD
50133-044	FRAZIER		J1 129RDAP	1230	J12-201U	W J1 ORD
39967-509	HALE		J1 129RDAP	1230	J12-223L	W J1 ORD
01609-120	JONES		J1 129RDAP	1230	J11-119U	W LABOR PL
32636-064	JONES		J1 129RDAP	1230	J12-217L	W J1 ORD
51087-509	KELLER		J1 129RDAP	1230	J12-224U	W LABOR PL
26084-075	MOORE		J1 129RDAP	1230	J12-212U	W LABOR PL
95668-298	SANCHEZ		J1 129RDAP	1230	J12-214L	W REC AIDE
89362-007	WILLIAMS		J1 129RDAP	1230	J11-104L	W LABOR PL
22244-078	DELBOSQUE		PA #1	0800	K11-131L	W K1 ORD
77275-054	DUNCAN		PA #1	0800	K11-101L	W LABOR PL
15898-033	GARCIA		PA #1	0800	K14-211L	W LABOR PL
35444-058	GRIFFITH		PA #1	0800	K12-211U	W FAC GM
22501-084	HARPER		PA #1	0800	K11-125U	W K1 ORD
52286-074	KENNEDY		PA #1	0800	K11-102U	W LANDS AM
13538-062	KNIGHT		PA #1	0800	K11-105U	W LABOR PL
69877-067	STRAUSBAUG		PA #1	0800	K13-129L	W CHAPEL
47539-074	ALLEN		PA #1	1200	J14-213U	W LABOR PL
94697-479	BALDERAS		PA #1	1200	J11-122U	W FS KITPM
65842-509	FARRIS		PA #1	1200	J11-121L	W LABOR PL
77156-097	FELIX		PA #1	1200	J12-227U	W COMPND A
15671-049	KEROUAC		PA #1	1200	J11-113L	W LABOR PL

G0002

MORE PAGES TO FOLLOW . . .

CICCHIELLO, JOAN 72896067

**Individualized Needs Plan - Program Review (Inmate Copy)**

SEQUENCE: 02111758

Dept. of Justice / Federal Bureau of Prisons

Team Date: 09-24-2022

Plan is for inmate: CICCHIELLO, JOAN 72896-067

Current Medical Duty Status Assignments

Assignment	Description	Start
COLD/WIND	NO EXCESS COLD/WIND	06-12-2018
C19-QUAR	COVID-19 QUARANTINED	04-16-2020
C19-T NEG	COVID-19 TEST-RESULTS NEGATIVE	06-09-2020
LIMIT SUN	NO EXCESS SUN	06-12-2018
LOWER BUNK	LOWER BUNK REQUIRED	09-06-2022
NO PAPER	NO PAPER MEDICAL RECORD	06-06-2018
REG DUTY W	REGULAR DUTY W/MED RESTRICTION	06-12-2018
SOFT SHOES	SOFT SHOES ONLY	06-12-2018
WGT 15 LB	WEIGHT-NO LIFTING OVER 15 LBS	06-12-2018
YES F/S	CLEARED FOR FOOD SERVICE	06-12-2018

Current Drug Assignments

Assignment	Description	Start
NO ASSIGNMENTS		

FRP Payment Plan**Most Recent Payment Plan**

FRP Assignment: PART FINANC RESP-PARTICIPATES Start: 02-05-2020

Inmate Decision: AGREED \$25.00 Frequency: QUARTERLY

Payments past 6 months: \$0.00 Obligation Balance: \$300,822.17

Financial Obligations

No.	Type	Amount	Balance	Payable	Status
1	ASSMT	\$100.00	\$0.00	IMMEDIATE	COMPLETEDZ
** NO ADJUSTMENTS MADE IN LAST 6 MONTHS **					
4	ASSMT	\$100.00	\$100.00	IMMEDIATE	AGREED
** NO ADJUSTMENTS MADE IN LAST 6 MONTHS **					
2	REST NV	\$151,122.17	\$150,722.17	IMMEDIATE	AGREED
** NO ADJUSTMENTS MADE IN LAST 6 MONTHS **					
3	FINE	\$150,000.00	\$150,000.00	IMMEDIATE	AGREED
** NO ADJUSTMENTS MADE IN LAST 6 MONTHS **					

FRP Deposits

Trust Fund Deposits - Past 6 months: \$ N/A

Payments commensurate ? N/A

New Payment Plan: ** No data **

Current FSA Assignments

Assignment	Description	Start
N-ANGER R	NEED - ANGER/HOSTILITY REFUSE	08-27-2022
N-ANTISO R	NEED - ANTSOCIAL PEERS REFUSE	08-27-2022
N-COGNTV R	NEED - COGNITIONS REFUSE	08-27-2022
N-DYSLEX N	NEED - DYSLEXIA NO	08-29-2022
N-FIN PV Y	NEED - FINANCE/POVERTY YES	09-21-2022
N-FM/PAR R	NEED - FAMILY/PARENTING REFUSE	08-27-2022
N-M HLTH N	NEED - MENTAL HEALTH NO	08-27-2022
N-MEDICL Y	NEED - MEDICAL YES	09-06-2022
N-RLF Y	NEED - REC/LEISURE/FITNESS YES	09-06-2022
N-WORK N	NEED - WORK NO	08-29-2022
R-MIN	MINIMUM RISK RECIDIVISM LEVEL	09-21-2022
UNREVVW HIS	UNREVIEWED OFFENSES	05-04-2021

Progress since last review

Cicchello was advised at initial classification and program reviews to maintain clear conduct, have positive staff & peer interaction, participate in educational/vocational recommendations & requirements, meet Financial Responsibility Program (FRP) requirements & responsibilities, participate in programming recommendations and requirements. She was encouraged to obtain a work assignment/institution employment. To maintain positive friend & family communication, participate in Release Preparation Program

U.S. DEPARTMENT OF JUSTICE
Federal Bureau of Prisons

REQUEST FOR ADMINISTRATIVE REMEDY

Type or use ball-point pen. If attachments are needed, submit four copies. Additional instructions on reverse.

From: Cochiello Joan LAST NAME, FIRST, MIDDLE INITIAL REG. NO. 72896067 UNIT K, 221 INSTITUTION SFFHazleton

Part A- INMATE REQUEST ON 9/21/2022 I Received my Individual Needs Plans Initial Classification ON page 2 of my Classification Form. IN STATES I Refused All Programs ON my FSA Assignments IN STATE I Refused. ON 10-4-2022 I ATTENDED my 1st Program-Cauterized TRAUMA in Life I wrote to Psych -See Attached WITH my FSA CREDITS & Elderly Provision BOP Policy 5050.5 Petitioner Request/Demands Time Served Resubmitted from 10/4/22.

10/17/2022
DATE

J. Cochielo
SIGNATURE OF REQUESTER

Part B- RESPONSE

DATE

WARDEN OR REGIONAL DIRECTOR

If dissatisfied with this response, you may appeal to the Regional Director. Your appeal must be received in the Regional Office within 20 calendar days of the date of this response.

ORIGINAL: RETURN TO INMATE

CASE NUMBER: _____

CASE NUMBER: _____

Part C- RECEIPT

Return to: _____

LAST NAME, FIRST, MIDDLE INITIAL

REG. NO.

UNIT

INSTITUTION

TRULINCS 72896067 - CICCHIELLO, JOAN - Unit: HAF-K-A

FROM: FCI Psychology Services
TO: 72896067
SUBJECT: RE:***Inmate to Staff Message***
DATE: 10/05/2022 08:47:02 AM

Threshold Program
Right/Wrong Decisions
Family Programming Series
Foundations

The above classes are not offered through Psychology Services.
Your interest in the other programs requested has been relayed to the appropriate program coordinator.

From: ~^! CICCHIELLO, ~^!JOAN <72896067@inmatemessage.com>
Sent: Tuesday, October 4, 2022 08:08 PM
To: HAF-InmateToPsychologySvcs (BOP) >
Subject: ***Request to Staff*** CICCHIELLO, JOAN, Reg# 72896067, HAF-K-A

To: Psychology
Inmate Work Assignment: N/A

I would like to be placed on the list for the following programs:
Money Smart for Older Adults
Resolve
Threshold Program
Basic Cognitive Skill programs
Cognitive Processing Therapy
Right/Wrong Decisions
Emotional Self Regulation
Family Programming Series
Foundations

thank You for your time and inconvience

Joan Cicchiello

TRULINCS 72896067 - CICCHIELLO, JOAN - Unit: HAF-K-A

FROM: FCI Psychology Services
TO: 72896067
SUBJECT: RE:***Inmate to Staff Message***
DATE: 10/04/2022 07:57:02 AM

You are already on call out for the Trauma in Life workshop. If you wish to enroll in other courses, you must indicate which ones you are looking to take.

From: ~^! CICCHIELLO, ~^!JOAN <72896067@inmatemessage.com>
Sent: Monday, October 3, 2022 01:36 PM
To: HAF-InmateToPsychologySvcs (BOP) >
Subject: ***Request to Staff*** CICCHIELLO, JOAN, Reg# 72896067, HAF-K-A

To: Psychology services
Inmate Work Assignment: N/A

Psych Services

I have never refused any/all programing. I am very much interested in taking any/all courses, programs, in-services available on campus.

Thank you for your time and inconvenience in this matter

Respectfully submitted

Joan Cicchiello